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MODAL					Complete If Known
Subs	Substitute for form 1449/PTO			Application Number	10/655.804
IN	FORMATION	N DIS	SCLOSURE	Filing Date	September 4, 2003
S	STATEMENT BY APPLICANT			First Named Inventor	Jonathan Helitzer
1				Art Unit	3626
	(Use as many sh	heets as	necessary)	Examiner Name	Not Yet Assigned
Sheet	1	of	1	Attomey Docket Number	HSDO-P01-002

U.S. PATENT DOCUMENTS					
Examiner Initials*	Cite No.1	Document Number  Number-Kind Code <sup>2</sup> ( if known)	Publication Date MM-DD-YYYY	Name of Palentee or Applicant of Cited Document	Pages, Columns, Lines, Where Relevant Passages or Relevant Figures Appear

FOREIGN PATENT DOCUMENTS						
Examiner Initials*	Cite No.1	Foreign Patent Document  Country Code <sup>3</sup> -Number <sup>4</sup> -Kind Code <sup>5</sup> ( <i>if known</i> )	Publication Date MM-DD-YYYY	Name of Patentee or Applicant of Cited Document	Pages, Columns, Lines, Where Relevant Passages Or Relevant Figures Appear	
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Examiner Signature	Date Considered	

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NON PATENT LITERATURE DOCUMENTS				
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	CD	Nerad, Jack. Insurance by the mile. (12/22/2004) Retrieved from http://www.drivers.com.		
	CE	Johnston, J. Vehicle's Black Box Holds Key To Crash (5/21/2003). Retrieved from http://news.tbo.com		
	CF	Litman, T. Distance-Based Vehicle Insurance Feasibility, Costs and Benefits. Comprehensive Technical Report). Victoria Transport Policy Institute. (7/8/04)		

Examiner Signature	/Tran Nguyen/	Date Considered	03/26/2008

<sup>\*</sup>EXAMINER: Initial if reference considered, whether or not citation is in conformance with MPEP 609. Draw line through citation if not in conformance and not considered. Include copy of this form with next communication to applicant.

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